

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 66 / 194

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. John T. Alexander

Mailing Address 372 Baymount Drive

City

Statesville

State

NC

Zip Code

28625-9548

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.02

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 3 1 / 2 0 1 1

Transaction ID: PR212345644

Amount of Each Receipt this Period

83.34

P/R Deduction (\$83.34 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. M. P. Daly

Mailing Address 1426 State Route 125

City

Hamersville

State

OH

Zip Code

45130-9509

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 3 1 / 2 0 1 1

Transaction ID: PR212495644

Amount of Each Receipt this Period

250.00

P/R Deduction (\$250.00 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Todd Olig

Mailing Address 1006 Dewey Street

City

Kiel

State

WI

Zip Code

53042-1242

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.99

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 3 1 / 2 0 1 1

Transaction ID: PR212735644

Amount of Each Receipt this Period

83.33

P/R Deduction (\$83.33 Monthly)

SUBTOTAL of Receipts This Page (optional)

416.67

TOTAL This Period (last page this line number only)